Image# 12970908442 PAGE 1 / 27

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORW 3X	For Other	Than An Aut	horized Cor	nmittee		Office Use Or	ıly
NAME OF COMMITTEE (in full)	TYPE OR I	PRINT ▼	Example: over the	If typing, type nes.	12FE4N	15	-
TEXAS SPINE AND	JOINT HO	SPITAL PA	C				
ADDRESS (number and street)	1814 RO	SELAND BLVD					
Check if different							
than previously reported. (ACC)	TYLER				L	75701	
2. FEC IDENTIFICATION N	NUMBER ▼	CI7	Υ▲		STATE ▲	ZIP	CODE A
C C00437525		_	S THIS REPORT	NEW (N) C		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Mor Rep	ort On:	20 (M2)	May 20 (ug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar	20 (M3)	Jun 20 (N	/16) Se	ep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report	(01)	Apr	20 (M4)	Jul 20 (M	7) 0	ct 20 (M10)	Jan 31 (YE)
July 15	(C)	12-Day PRE-Election	Prima	ry (12P)	Gener	al (12G)	Runoff (12R)
Quarterly Report October 15		Report for the:	Conve	ention (12C)	Specia	al (12S)	
Quarterly Report January 31		Electio		M / D D	/	"" (he te of
Year-End Report July 31 Mid-Year	(d)	30-Day	WIT OIT		_	Sta	te oi
Report (Non-elect Year Only) (MY)		POST-Election Report for the:	Gene	al (30G)	Runoff	f (30R)	Special (30S)
Termination Repo (TER)	rt	Electio	on on	M / D D	/ Y Y Y Y	in t	he te of
5. Covering Period	01 01	2012		ough 03	M / D D	2012	Y
I certify that I have examined	this Report a	nd to the best of	my knowledge	and belief it i	s true, correct a	and complete.	
Type or Print Name of Treasur	rer ANTHON	IY WAHL					
Signature of Treasurer AN	THONY WAHL		[Electi	onically Filed]	Date 04	13	2012
NOTE: Submission of false, erro	neous, or inc	omplete informatio	n may subject	he person signi	ng this Report to	the penalties of	2 U.S.C. §437g.
Office Use Only							ORM 3X 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

TEXAS SPINE AND JOINT HOSPITAL PAC

2012 03 2012 Report Covering the Period: 01 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 65910.94 January 1, 2012 (b) Cash on Hand at 65910.94 Beginning of Reporting Period..... 21492.00 21492.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 87402.94 87402.94 6(a) and 6(c) for Column B)..... 22500.00 22500.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 64902.94 64902.94 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

TEXAS SPINE AND JOINT HOSPITAL PAC

I. Receipts	I. Receipts COLUMN A Total This Period			
Contributions (other than loans) From:		Calendar Year-to-Date		
(a) Individuals/Persons Other				
Than Political Committees		10045.00		
(i) Itemized (use Schedule A)	13615.00	13615.00		
(ii) Unitemized(iii) TOTAL (add	2877.00	2877.00		
Lines 11(a)(i) and (ii)	16492.00	16492.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry	16492.00	16492.00		
Totals to Line 33, page 5)	10432.00	15452.50		
Transfers From Affiliated/Other Party Committees	0.00	0.00		
rarty Committees	0.00	0.00		
. All Loans Received	0.00	0.00		
7.11. 204.10 7.0007.04 7.11.11.11.11.11.11.11.11.11.11.11.11.11	7	7		
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures	7	5.00		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.00	0.00		
. Refunds of Contributions Made				
to Federal Candidates and Other				
Political Committees	5000.00	5000.00		
. Other Federal Receipts	7	7 7		
(Dividends, Interest, etc.)	0.00	0.00		
. Transfers from Non-Federal and Levin Funds				
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
, , , , , , , , , , , , , , , , , , , ,	7			
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	21492.00	21492.00		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	21492.00	21492.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Operating Expenditures: — (a) Allocated Federal/Non-Federal		Calcillati icar-to-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
/// N. T. I. I. O.	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	0.00	0.00		
Expenditures(c) Total Operating Expenditures	0.00	0.00		
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00		
Transfers to Affiliated/Other Party				
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	22500.00	22500.00		
Independent Expenditures				
(use Schedule E) Coordinated Party Expenditures	0.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(use Schedule F)	3.00	0.00		
Loan Repayments Made	0.00	0.00		
Loan Hopaymonia Wade				
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
F				
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees		0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
(444 21100 20(4), (5), 414 (6))	7 7	7 7		
Other Disbursements	0.00	0.00		
_		7		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	7 7 7			
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
_	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	22500.00	22500.00		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	22500.00	22500.00		
from Line 31)	22300.00	22300.00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	16492.00	16492.00	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16492.00	16492.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	6	OF	27
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NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOSPITAL PAC Full Name (Last, First, Middle Initial) TIMOTHY BECK Mailing Address 9132 CHEROKEE TRAIL City State TYLER TX 75703 Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
A. TIMOTHY BECK Mailing Address 9132 CHEROKEE TRAIL City State Zip Code Transaction ID : SA11AI.4847 TYLER TX 75703 Date of Receipt M M M J D D J J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	' '	DSPITAL PAC	
City State Zip Code Transaction ID : SA11AI.4847 TYLER TX 75703 FEC ID number of contributing	A. TIMOTHY BECK		
icacial political committee.	TYLER FEC ID number of contributing federal political committee.	TX 75703	Transaction ID : SA11AI.4847 Amount of Each Receipt this Period
Name of Employer SELF EMPLOYED Receipt For: Primary Other (specify) ▼ Occupation PHYSICIAN Aggregate Year-to-Date ▼ 300.00	SELF EMPLOYED Receipt For: Primary General	PHYSICIAN Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) TROY CALLENDER Mailing Address 3413 GOLDEN ROAD Date of Receipt 03 31 2012	Mailing Address 3413 GOLDEN ROAD		M = M / D = D / Y = Y = Y
City State Zip Code Transaction ID : SA11AI.4857 TYLER TX 75701 Amount of Each Receipt this Period FEC ID number of contributing federal political committee.	TYLER FEC ID number of contributing	TX 75701	Amount of Each Receipt this Period
Name of Employer SELF EMPLOYED Receipt For: Primary Other (specify) ▼ Occupation PHYSICIAN Aggregate Year-to-Date ▼ 334.00	SELF EMPLOYED Receipt For: Primary General	PHYSICIAN Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) AARON CALODNEY Mailing Address 17909 CR 132 City State TX TX TX TS75762 Date of Receipt Transaction ID: SA11AL4778 Amount of Footh Receipt this Region	AARON CALODNEY Mailing Address 17909 CR 132 City		01 31 2012 Transaction ID : SA11AI.4778
FLINT TX 75762 Amount of Each Receipt this Period C Description C Description Primary C Aggregate Year-to-Date ▼ C Description Description C Description Description C Description Descript	FEC ID number of contributing federal political committee. Name of Employer SELF EMPLOYED Receipt For: Primary General	C Occupation PHYSICIAN Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)	<u> </u>	524.00

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO						
Full Name (Last, First, Middle Initial) AARON CALODNEY Mailing Address 17909 CR 132		Date of Receipt				
City	State Zip Code	02 29 2012				
FLINT	TX 75762	Transaction ID : SA11AI.4779 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	290.00				
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 580.00					
Full Name (Last, First, Middle Initial) AARON CALODNEY Mailing Address 17909 CR 132		Date of Receipt				
City FLINT	State Zip Code TX 75762	03 31 2012				
FEINT FEC ID number of contributing federal political committee.	C 75/62	Amount of Each Receipt this Period 386.00				
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 966.00					
Full Name (Last, First, Middle Initial) . JOHN CAMP		Date of Receipt				
Mailing Address 606 CUMBERLAND ROAD		01 31 _ 2012 _				
City TYLER	State Zip Code TX 75703	Transaction ID : SA11AI.4839 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	209.00				
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00					
SUBTOTAL of Receipts This Page (optional)		885.00				
TOTAL This Period (last page this line number	only)					

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT H	IOSPITAL PAC	
Full Name (Last, First, Middle Initial) JOHN CAMP Mailing Address 606 CUMBERLAND ROAL)	Date of Receipt
City TYLER FEC ID number of contributing federal political committee. Name of Employer SELF EMPLOYED Receipt For: Primary General	State Zip Code TX 75703 C Occupation PHYSICIAN Aggregate Year-to-Date ▼	Transaction ID : SA11AI.4840 Amount of Each Receipt this Period 209.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) JOHN CAMP Mailing Address 606 CUMBERLAND ROAD City	State Zip Code	Date of Receipt 03 31 2012 Transaction ID: SA11AI.4841
TYLER FEC ID number of contributing federal political committee. Name of Employer SELF EMPLOYED Receipt For: □ Primary □ General Other (specify) ▼	TX 75703 C Occupation PHYSICIAN Aggregate Year-to-Date ▼ 697.00	Amount of Each Receipt this Period 279.00
Full Name (Last, First, Middle Initial) STUART CRUTCHFIELD Mailing Address 2066 CANBERRA COURT City TYLER FEC ID number of contributing federal political committee. Name of Employer SELF EMPLOYED Receipt For:	State Zip Code TX 75701 C Occupation PHYSICIAN Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O1 31 2012 Transaction ID : SA11AI.4781 Amount of Each Receipt this Period 293.00
	293.00	781.00
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	9	OF	27
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC	
Full Name (Last, First, Middle Initial) A. STUART CRUTCHFIELD Mailing Address 2066 CANBERRA COURT		Date of Receipt
City TYLER	State Zip Code TX 75701	02 29 2012 Transaction ID : SA11AI.4782 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer SELF EMPLOYED Receipt For:	Occupation PHYSICIAN Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	586.00	
Full Name (Last, First, Middle Initial) STUART CRUTCHFIELD Mailing Address 2066 CANBERRA COURT		Date of Receipt 03 31 2012
City TYLER	State Zip Code TX 75701	Transaction ID : SA11AI.4783 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	391.00
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 977.00	
Full Name (Last, First, Middle Initial) C. GUY DANIELSON		Date of Receipt
Mailing Address 16950 FM 2661		03 31 2012
City FLINT	State Zip Code TX 75762	Transaction ID : SA11AI.4786 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.00
Name of Employer SELF EMPLOYED Receipt For:	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 249.00	
SUBTOTAL of Receipts This Page (optional)	•	767.00
TOTAL This Period (last page this line numbe	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE	NUMBER	: PAGE	10 OF	27			
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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO		
Full Name (Last, First, Middle Initial) ROBERT DENNIS Mailing Address 1008 WILDER WOOD		Date of Receipt
City	State Zip Code	01 31 2012
TYLER	TX 75703	Transaction ID : SA11AI.4787 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	269.00
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 269.00	
Full Name (Last, First, Middle Initial) ROBERT DENNIS Mailing Address 1008 WILDER WOOD		Date of Receipt
Mailing Address 1008 WILDER WOOD City	02 29 2012 Transaction ID : SA11AI.4788	
TYLER	State Zip Code TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	269.00
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 538.00	
Full Name (Last, First, Middle Initial) C. ROBERT DENNIS		Date of Receipt
Mailing Address 1008 WILDER WOOD		03 31 _ 2012 _
City TYLER	State Zip Code TX 75703	Transaction ID : SA11AI.4789 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	358.00
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	896.00	
SUBTOTAL of Receipts This Page (optional).	•	896.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	 11	OF	27		
(check only one)									
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or		name and address of any political committee to				
\rangle	NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HOS	SPITAL PAC				
Α.	Full Name (Last, First, Middle Initial) PAUL DETWEILER		Date of Receipt			
	Mailing Address 3635 CANYON CREEK CIRCL	01 31 _ 2012 _				
	City	Transaction ID : SA11AI.4790				
	TYLER	TX 75707	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	221.00			
	Name of Employer	Occupation				
	SELF EMPLOYED	PHYSICIAN				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary General Other (specify) ▼	221.00				
В.	Full Name (Last, First, Middle Initial) PAUL DETWEILER		Date of Receipt			
	Mailing Address 3635 CANYON CREEK CIRCL	02 29 2012				
	City	State Zip Code	Transaction ID : SA11AI.4791			
	TYLER	TX 75707	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	221.00			
	Name of Employer SELF EMPLOYED	Occupation PHYSICIAN				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 442.00				
С.	Full Name (Last, First, Middle Initial) PAUL DETWEILER		Date of Receipt			
	Mailing Address 3635 CANYON CREEK CIRCL	E	03 31 2012			
	City	State Zip Code	Transaction ID : SA11AI.4792			
	TYLER	TX 75707	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	294.00			
	Name of Employer	Occupation				
	SELF EMPLOYED	PHYSICIAN				
	Receipt For:	Aggregate Year-to-Date ▼				
	Primary General Other (specify) ▼	736.00				
S	SUBTOTAL of Receipts This Page (optional)		736.00			
Т	OTAL This Period (last page this line number of	only)				

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC	
Full Name (Last, First, Middle Initial) A. KIM FOREMAN Mailing Address 107 BELMEAD LANE		Date of Receipt
		03 31 2012
City	State Zip Code	Transaction ID : SA11AI.4844
TYLER	TX 75701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	126.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	316.00	
Full Name (Last, First, Middle Initial) HOWARD GARB		Date of Receipt
Mailing Address 3414 GOLDEN ROAD	03 31 2012	
City	State Zip Code	Transaction ID : SA11AI.4860
TYLER	TX 75701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	121.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 303.00	
Full Name (Last, First, Middle Initial) CARY GOODFRIED		Date of Receipt
Mailing Address 19140 FALLS CREEK		01 31 2012
City	State Zip Code	Transaction ID : SA11AI.4793
FLINT	TX 75762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	282.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	282.00	
SUBTOTAL of Receipts This Page (optional)	····	529.00
TOTAL This Period (last page this line number	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE		13	OF	27	
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	SPITAL PAC	
Full Name (Last, First, Middle Initial) A. GARY GOODFRIED		Date of Receipt
Mailing Address 19140 FALLS CREEK		02 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4794
FLINT	TX 75762	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	282.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	564.00	
Full Name (Last, First, Middle Initial) GARY GOODFRIED		Date of Receipt
Mailing Address 19140 FALLS CREEK	03 31 2012	
City FLINT	State Zip Code TX 75762	Transaction ID : SA11AI.4795
_	. 5. 52	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	377.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 941.00	
Full Name (Last, First, Middle Initial) CHARLES GORDON		Date of Receipt
Mailing Address 7302 HOLLYTREE DRIVE		01 31 2012
City	State Zip Code	Transaction ID : SA11AI.4796
TYLER	TN 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	959.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC	
Full Name (Last, First, Middle Initial) CHARLES GORDON Mailing Address 7302 HOLLYTREE DRIVE		Date of Receipt
Maining Addition 7302 HOLLT IKEE DRIVE		02 29 2012
City	State Zip Code	Transaction ID : SA11AI.4797
TYLER	TN 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) 3. CHARLES GORDON		Date of Receipt
Mailing Address 7302 HOLLYTREE DRIVE	03 31 2012	
City TYLER	State Zip Code TN 75703	Transaction ID : SA11AI.4798
_	10100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) THOMAS GRAHAM		Date of Receipt
Mailing Address 533 WILDER WAY		01 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4799
TYLER	TN 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	290.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	290.00	
SUBTOTAL of Receipts This Page (optional)	•	990.00
TOTAL This Period (last page this line number	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:					PAGE	 15	OF		27	
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO)SPITAL PAC						
Full Name (Last, First, Middle Initial) THOMAS GRAHAM Mailing Address 533 WILDER WAY		Date of Receipt					
Maining Address 555 WILDER WAY		02 29 2012					
City							
TYLER	TN 75703	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	290.00					
Name of Employer	Occupation						
SELF EMPLOYED	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	580.00						
Full Name (Last, First, Middle Initial) THOMAS GRAHAM		Date of Receipt					
Mailing Address 533 WILDER WAY	03 31 2012						
City	State Zip Code	Transaction ID : SA11AI.4801					
TYLER	TN 75703	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	386.00					
Name of Employer	Occupation						
SELF EMPLOYED	PHYSICIAN						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 966.00						
Full Name (Last, First, Middle Initial) DUANE GRIFFITH		Date of Receipt					
Mailing Address 7113 TURNBERRY CIRCLE		03 31 2012					
City	State Zip Code	Transaction ID : SA11AI.4866					
TYLER	TX 75703	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	113.00					
Name of Employer	Occupation						
SELF EMPLOYED	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	283.00						
SUBTOTAL of Receipts This Page (optional)		789.00					
TOTAL This Period (last page this line number	· only)						

Use separate schedule(s) for each category of the Detailed Summary Page

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	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT H	OSPITAL PAC	
Full Name (Last, First, Middle Initial) MARK HACKBARTH Mailing Address 3630 CANYON CREEK CIF	RCLE	Date of Receipt
		02 29 2012
City	State Zip Code	Transaction ID : SA11AI.4803
TYLER	TX 75707	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	128.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 256.00	
Full Name (Last, First, Middle Initial) MARK HACKBARTH Mailing Address 3630 CANYON CREEK CIF	RCLE	Date of Receipt
011	03 31 2012	
City TYLER	State Zip Code TX 75707	Transaction ID : SA11AI.4804
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	171.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 427.00	
Full Name (Last, First, Middle Initial) . JAMES HARRIS	·	Date of Receipt
Mailing Address 9243 CHISHOLM TRAIL		03 31 2012
City	State Zip Code TX 75703	Transaction ID : SA11AI.4807
TYLER	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional).		399.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC						
Full Name (Last, First, Middle Initial) STEUART HEATON		Date of Receipt					
Mailing Address 3413 GOLDEN ROAD		03 31 2012					
City	State Zip Code	Transaction ID : SA11AI.4854					
TYLERT	TX 75701	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	83.00					
Name of Employer	Occupation						
SELF EMPLOYED	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	249.00						
Full Name (Last, First, Middle Initial) 3. JEFF HUNTER		Date of Receipt					
Mailing Address 3415 GOLDEN ROAD							
City	State Zip Code	Transaction ID : SA11AI.4863					
TYLER	TX 75701	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Occupation						
SELF EMPLOYED	PHYSICIAN						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00						
Full Name (Last, First, Middle Initial) MATT JONES		Date of Receipt					
Mailing Address 3414 GOLDEN ROAD		03 31 2012					
City	State Zip Code	Transaction ID : SA11AI.4851					
TYLER	TX 75701	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	83.00					
Name of Employer	Occupation						
SELF EMPLOYED	PHYSICIAN						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	249.00						
SUBTOTAL of Receipts This Page (optional)		266.00					
TOTAL This Period (last page this line numbe	r only)						

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC	
Full Name (Last, First, Middle Initial) JON LEDLIE Mailing Address 6166 OLIAN CREEK		Date of Receipt
Mailing Address 6166 QUAIL CREEK		02 29 2012
City TYLER	State Zip Code TX 75703	Transaction ID : SA11AI.4809
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	167.00
Name of Employer	Occupation	
SELF EMPLOYED Receipt For:	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	334.00	
Full Name (Last, First, Middle Initial) 3. JON LEDLIE		Date of Receipt
Mailing Address 6166 QUAIL CREEK	03 31 2012	
City TYLER	State Zip Code TX 75703	Transaction ID : SA11AI.4810
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	167.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00	
Full Name (Last, First, Middle Initial) JAMES MICHAELS		Date of Possint
Mailing Address 2013 HOLLY CREEK DR.		Date of Receipt O1 31 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.4811
TYLER	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	291.00
Name of Employer	Occupation	
SELF EMPLOYED Receipt For:	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	291.00	
SUBTOTAL of Receipts This Page (optional)		625.00
TOTAL This Period (last page this line number	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	SPITAL PAC	
Full Name (Last, First, Middle Initial) JAMES MICHAELS Mailing Address 2013 HOLLY CREEK DR.		Date of Receipt
		02 29 2012
City	State Zip Code TX 75703	Transaction ID : SA11AI.4812
TYLER	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	291.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	582.00	
Full Name (Last, First, Middle Initial) JAMES MICHAELS		Date of Receipt
Mailing Address 2013 HOLLY CREEK DR.		03 31 2012
City TYLER	State Zip Code TX 75703	Transaction ID : SA11AI.4813
_	10100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	388.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 970.00	
Full Name (Last, First, Middle Initial) . JOHN PRIDDY		Date of Receipt
Mailing Address 17950 TIMOTHY CT.		02 29 2012
City	State Zip Code	Transaction ID : SA11AI.4837
TYLER	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	138.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	276.00	
SUBTOTAL of Receipts This Page (optional)		817.00
TOTAL This Period (last page this line number	<u>·</u>	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT H	IOSPITAL PAC						
Full Name (Last, First, Middle Initial) JOHN PRIDDY Mailing Address 17950 TIMOTHY CT.		Date of Receipt					
	City State Zip Code						
TYLER	TX 75703	Transaction ID : SA11AI.4838 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	184.00					
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00						
Full Name (Last, First, Middle Initial) TODD RAABE Mailing Address 16987 FM 756		Date of Receipt					
City WHITEHOUSE	State Zip Code TX 75791	01 31 2012 Transaction ID : SA11AI.4814 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C 13/31	373.00					
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 373.00						
Full Name (Last, First, Middle Initial) . TODD RAABE	·	Date of Receipt					
Mailing Address 16987 FM 756		02 29 2012					
City WHITEHOUSE	State Zip Code TX 75791	Transaction ID : SA11AI.4815 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	373.00					
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 746.00						
SUBTOTAL of Receipts This Page (optional)	>	930.00					
TOTAL This Period (last page this line numb	er only)						

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC	
Full Name (Last, First, Middle Initial) 1. TODD RAABE		Date of Receipt
Mailing Address 16987 FM 756		02 29 2012
City	State Zip Code	Transaction ID : SA11AI.4816
WHITEHOUSE	TX 75791	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	498.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1244.00	
Full Name (Last, First, Middle Initial) MARK RENFRO		Date of Receipt
Mailing Address 2737 OLD BULLARD ROAD	01 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID : SA11AI.4817
TYLER	TX 75701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	232.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 232.00	
Full Name (Last, First, Middle Initial) MARK RENFRO		Date of Receipt
Mailing Address 2737 OLD BULLARD ROAD		02 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4818
TYLER	TX 75701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	232.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	464.00	
SUBTOTAL of Receipts This Page (optional)		962.00
TOTAL This Period (last page this line numbe	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using t	the name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO	OSPITAL PAC	
Full Name (Last, First, Middle Initial) MARK RENFRO Mailing Address 2737 OLD BULLARD ROAL)	Date of Receipt
g . iss. see 2707 OLD BOLLAND NOAL	-	03 31 2012
City	State Zip Code	Transaction ID : SA11AI.4819
TYLER	TX 75701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	310.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	774.00	
Full Name (Last, First, Middle Initial) MICHAEL RUSSELL		Date of Receipt
Mailing Address 5930 BRIXWORTH		01 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.4820
TYLER	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	280.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) . MICHAEL RUSSELL		Date of Receipt
Mailing Address 5930 BRIXWORTH		02 29 2012
City	State Zip Code	Transaction ID : SA11AI.4821
TYLER	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	280.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	560.00	
SUBTOTAL of Receipts This Page (optional).	•	870.00
TOTAL This Period (last page this line number	<u> </u>	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HO)SPITAL PAC	
Full Name (Last, First, Middle Initial) MICHAEL RUSSELL Mailing Address 5020 RRIVWORTH		Date of Receipt
Mailing Address 5930 BRIXWORTH		03 31 2012
City TYLER	State Zip Code TX 75703	Transaction ID : SA11AI.4822
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	373.00
Name of Employer	Occupation	
SELF EMPLOYED Receipt For:	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	933.00	
Full Name (Last, First, Middle Initial) WILLIAM SCHREIBER		Date of Receipt
Mailing Address 6407 HOLLYTREE CIRCLE		03 31 2012
City TYLER	State Zip Code TN 75703	Transaction ID : SA11AI.4829
FEC ID number of contributing	75.55	Amount of Each Receipt this Period
federal political committee.	C	83.00
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	249.00	
Full Name (Last, First, Middle Initial) JERRY SCHWARZBACH		Date of Receipt
Mailing Address 8304 COLUMBIA DRIVE		03 31 2012
City	State Zip Code	Transaction ID : SA11AI.4832
TYLER	TX 75703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
SELF EMPLOYED Receipt For:	PHYSICIAN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)	•	556.00
TOTAL This Period (last page this line number	<u> </u>	

Use separate schedule(s) for each category of the Detailed Summary Page

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		13	14		15		16		17	

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HC	SPITAL PAC				
Full Name (Last, First, Middle Initial) CLAIRE TIBILETTI Mailing Address 16690 DRIFTWOOD		Date of Receipt			
City	State Zip Code	02 29 2012 Transaction ID : SA11AI.4834			
TYLER FEC ID number of contributing federal political committee.	TX 75707	Amount of Each Receipt this Period			
Name of Employer SELF EMPLOYED Receipt For:	Occupation PHYSICIAN				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 334.00				
Full Name (Last, First, Middle Initial) CLAIRE TIBILETTI Mailing Address 16690 DRIFTWOOD		Date of Receipt 03 31 2012			
City TYLER	State Zip Code TX 75707	7 Transaction ID : SA11AI.4835 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	167.00			
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00				
Full Name (Last, First, Middle Initial)		Date of Receipt			
Mailing Address	State 7in Code	M = M / D = D / Y = Y = Y			
City FFC ID number of contributing	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C				
Name of Employer	Occupation				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional)	<u> </u>	334.00			
TOTAL This Period (last page this line number	only)	13615.00			

	FOR LINE NUMBER:						PAGE	2	25 OF	27
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.										

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any personal part of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEXAS SPINE AND JOINT HC	SPITAL PAC	
Mailing Address 228 S. WASHINGTON STRE SUITE 115 City ALEXANDRIA FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	FOR UTILIZING SENSIBLE TACTICS ET State Zip Code VA 22314 C C00330720 Occupation Aggregate Year-to-Date ▼ 5000.00	Date of Receipt O1 31 2012 Transaction ID: SA16.4875 Amount of Each Receipt this Period 5000.00 VOIDED CHECK 55046
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code C Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Mailing Address City	State Zin Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		5000.00
TOTAL This Period (last page this line number	only)	5000.00

S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 26 OF 27					
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only	nly one)				
		Detailed Summary Page	21b	22 X 23 24	25 26			
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	ny information copied from such Reports and Staten for commercial purposes, other than using the nam							
Ĺ	NAME OF COMMITTEE (In Full)	,,						
$ \rangle$	TEXAS SPINE AND JOINT HOSPI	TAL PAC						
\angle								
_	Full Name (Last, First, Middle Initial)	Data of Bishamana						
Α.	JOHN BARRASSO	Date of Disbursement						
	Mailing Address 6896 CASPER MOUNTAIN ROAD			02 06	2012			
				ا بنا بنا				
	,	State Zip Code		Transaction ID : SB23.4871				
	CASPER Purpose of Disbursement	WY 82601						
	DONATION			Amount of Each Disburse	ement this Period			
	Candidate Name		Category/	2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2				
			Type		5000.00			
	Office Sought: House Disbursen	nent For:						
		Primary General						
	State: WY District: 00	Other (specify) ▼						
_	Full Name (Last, First, Middle Initial)							
В.	•			Date of Disbursement				
	BERWART OR GOITOREGO			M M / D D /	Y Y Y Y			
	Mailing Address			01 13	2012			
	City	State Zip Code		Transaction ID : SB23.4	4877			
	Purpose of Disbursement							
				Amount of Each Disburse	ement this Period			
	Candidate Name		Category/		5000.00			
	000		Туре		3000.00			
	Office Sought: House Disbursen Senate	nent For: Primary General						
		Other (specify)						
	State: District:	Canon (openity)						
_	Full Name (Last, First, Middle Initial)							
C.	FEINSTEIN FOR SENATE			Date of Disbursement				
					Y I Y I Y I Y			
	Mailing Address 1801 AVENUE OF THE STARS SU	JITE 829		01 31	2012			
	City	State Zip Code						
	LOS ANGELES	CA 90067		Transaction ID : SB23.4	4873			
	Purpose of Disbursement DONATION							
	Candidate Name		Amount of Each Disburse	ement this Period				
	Candidate Name		Category/ Type		5000.00			
	Office Sought: House Disbursen	nent For:	i ype					
		Primary General						
	President	Other (specify) ▼						
	State: CA District: 00							
					15000.00			
[5	SUBTOTAL of Disbursements This Page (optional)		·····•		15000.00			
Ι,	*OTAL This Period (last page this line number only)							
1 '	VIAL THIS I CHOOL (last page this line number only)							

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 27 OF 27					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	04 🗆 05 🗆 66			
	Detailed Summary Page	21b		24 25 26 28c 29 30b			
Any information copied from such Reports and State	monte may not be sold or use						
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
$ \; angle$ TEXAS SPINE AND JOINT HOSP	ITAL PAC						
Full Name (Last First Middle Initial)							
Full Name (Last, First, Middle Initial) A. JEB HON. HENSARLING			Date of Disbursement				
JEB HON: HENOAREING	M M / D D / Y Y Y Y						
Mailing Address PO BOX 820504			02 20	2012			
City	State Zip Code						
DALLAS	TX 75382		Transaction ID : SB2	23.4869			
Purpose of Disbursement							
RECEPTION			Amount of Each Disbu	ursement this Period			
Candidate Name		Category/		2500.00			
Office Sought: House Disburse	ment For:	Туре		7			
Senate	Primary General						
President	Other (specify) ▼						
State: TX District: 05							
Full Name (Last, First, Middle Initial)		MITTEE	Data of Diahamaanaan				
B. PHYSICIAN HOSPITALS OF AMERICA PO	OLITICAL ACTION COM	VIIIIEE	Date of Disbursement	Y			
Mailing Address PO BOX 70980			02 06 2012				
•	State Zip Code DC 20024		Transaction ID : SB	23.4870			
WASHINGTON Purpose of Disbursement	DC 20024						
DÖNATION			Amount of Each Disbu	ursement this Period			
Candidate Name		Category/		5000.00			
Office County		Type		3000.00			
Office Sought: House Disburse Senate	ment For: Primary General						
President	Other (specify) ▼						
State: District:	· · · · · · · · · · · · · · · · · · ·						
Full Name (Last, First, Middle Initial)							
C.			Date of Disbursement				
Mailing Address			M M / D D /	Y Y Y Y Y			
Mailing Address	Mailing Address						
City	State Zip Code						
Purpose of Disbursement							
i dipose oi Dispuisement		· · ·	Amount of Each Disbu	reament this Pariod			
Candidate Name		Category/	Amount of Lacif Displ	arsement this relied			
		Type					
	ment For:						
Senate President	Primary General Other (specify) ▼						
State: District:	Other (specify)						
SUBTOTAL of Disbursements This Page (optional)				7500.00			
				20500.00			
TOTAL This Period (last page this line number only)			22500.00			